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APPLICANTS

Michael Bishop, Atlanta, GA;
 Hong Nguyen, Atlanta, GA;

** CONTINUING DATA *None A.H.* *****

** FOREIGN APPLICATIONS *None A.H.* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>Amir H. H.</i>	INITIALS <i>A.H.</i>		

ADDRESS
 36192
 CANTOR COLBURN LLP - BELLSOUTH
 55 GRIFFIN ROAD SOUTH
 BLOOMFIELD , CT
 06002

TITLE
 Method, system and computer program product for providing a no-ring telephone call service

FILING FEE RECEIVED 946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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